2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000030099

Entity Name: GOLDBERG FINANCIAL ASSOCIATES, INC.

FILED Aug 08, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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20283 STATE RD 7 STE 300 BOCA RATON, FL 33498

Current Mailing Address: New Mailing Address:

20283 STATE RD 7 STE 300 BOCA RATON, FL 33498

FEI Number: 02-0587487 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

 GOLDBERG, MICHAEL
 GOLDBERG, SUSAN

 20283 STATE RD 7 STE 300
 20283 STATE RD 7 STE 300

 BOCA RATON, FL 33498 US
 BOCA RATON, FL 33498 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: SUSAN GOLDBERG 08/08/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition
Name: GOLDBERG, MICHAEL Name: GOLDBERG, SUSAN
Address: 20283 STATE ROAD 7 ST 300

 Address:
 20283 STATE ROAD 7 ST., 300
 Address:
 20283 STATE ROAD 7 STE, 300

 City-St-Zip:
 BOCA RATON, FL 33498
 City-St-Zip:
 BOCA RATON, FL 33498

Title: () Delete Title: S () Change (X) Addition

Name: Name: GOLDBERG, SUSAN

 Address:
 Address:
 20283 STATE ROAD 7 STE 300

 City-St-Zip:
 City-St-Zip:
 BOCA RATON, FL 33498

Title: () Delete Title: T () Change (X) Addition

Name: GOLDBERG, SUSAN

 Address:
 Address:
 20283 STATE ROAD 7, STE 300

 City-St-Zip:
 City-St-Zip:
 BOCA RATON, FL 33498

Title: () Delete Title: D () Change (X) Addition

 Name:
 Name:
 GOLDBERG, SUSAN

 Address:
 Address:
 20283 STATE ROAD 7, STE 300

 City-St-Zip:
 City-St-Zip:
 BOCA RATON, FL 33498

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUSAN GOLDBERG P 08/08/2005